

**ISSUE SLIP STAPLE AREA (for additional cross references)**

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	MTB	954	7/30/01
RESPONSE FORMALITY REVIEW			

**INDEX OF CLAIMS**

✓	..... Rejected	N	..... Non-elected
=	..... Allowed	I	..... Interference
-	(Through numeral)..... Canceled	A	..... Appeal
+	..... Restricted	O	..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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